Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03-19-2010	Address:	100 S. 4 TH ST	
Case #:	35F30319		PETERSBURG, IN 47567	
County:	PIKE		IN VEH TOWED TO JAIL	
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)		
☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		☐ Residence ☐ Outbuilding ☑ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:	
(check all	und: Location (bedroom, kitchen, open that apply) m/Ammonia Reaction(s):	air, etc)		
Red Pl	hosphorous/Iodine Reaction(s):			
⊠ Flamn	nable Solvents: <u>VEHICLE</u>		•	
Water	Reactive Metal (Lithium): <u>VEHICL</u>	<u>E</u>		
Anhyo	lrous Ammonia:			
Hydro	ochloric Acid Gas Generator(s):	<u>.</u>		
Corro	sive Acid:			
Corro	sive Base:			
Other	(item and location):			
☐ Yes ⊠ No	der age 18 discovered (check one) (number present) report to Child Protective Services	Ephedri	ve Information ine/Pseudoephedrine Tracking Log Merchant Tip	
This rep	ort is to be faxed to the following a	gencies that serve the	location:	
	artment: PETERSBURG VFD	Fax:		
Health Department: PIKE CO HD			<u>-354-2532</u> <u>-354-9811</u>	
	otection Service: PIKE CO CPS			
Investiga	ner information regarding this methan ating Officer: <u>RYAN M. JOHNSON</u>	Phone 812-867-20	<u> </u>	
** This	** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department			

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

listed within 24 hours of scene processing.